

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name <u>ORDER 4-09-65</u>		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>210 KNOLLWOOD DR</u> City <u>KEY BISCAYNE</u> State <u>FL</u> ZIP Code <u>33033</u>		Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>LOT 14 BLOCK 7 PB 70 PG 67</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>		
A5. Latitude/Longitude: Lat. <u>25°41'04"N</u> Long. <u>80°09'51"W</u>		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <u>3</u>		
A8. For a building with a crawlspace or enclosure(s):		
a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft		
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u>		
c) Total net area of flood openings in A8.b <u>N/A</u> sq in		
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		
A9. For a building with an attached garage:		
a) Square footage of attached garage <u>318</u> sq ft		
b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>3</u>		
c) Total net area of flood openings in A9.b <u>384</u> sq in		
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <u>KEY BISCAYNE 120648</u>		B2. County Name <u>MIAMI-DADE</u>		B3. State <u>FL</u>	
B4. Map/Panel Number <u>12025C 281</u>	B5. Suffix <u>J</u>	B6. FIRM Index Date <u>7-17-95</u>	B7. FIRM Panel Effective/Revised Date <u>3-2-94</u>	B8. Flood Zone(s) <u>AE</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>9</u>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) <u>N/A</u>					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) <u>N/A</u>					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date <u>N/A</u> <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete items C2.a-h below according to the building diagram specified in Item A7. Use the same datum as the BFE.
Benchmark Utilized MIAMI-DADE COUNTY Vertical Datum NGVD 1929
Conversion/Comments N/A

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>9.05</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>20.3</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>7.20</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>9.01</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG)	<u>6.7</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG)	<u>9.03</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>8.22</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

☒ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

Certifier's Name <u>JOSE A. PEREZ</u>		License Number <u>2852</u>	
Title <u>SURVEYOR AND MAPPER</u>		Company Name <u>CONTINENTAL LAND SURVEYORS, INC.</u>	
Address <u>1700 SW 57 AVE # 201</u>		City <u>MIAMI</u>	State <u>FL</u> ZIP Code <u>33155</u>
Signature <u>[Signature]</u>		Date <u>5-1-09</u>	Telephone <u>305-262-1925</u>

[Signature]
5-1-09

IMPORTANT: In these spaces, copy the corresponding information from Section A.	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 110 KNOLLWOOD DRIVE	Policy Number
City KEY BISCAYNE State FL ZIP Code 33033	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments SECTION C2.E) IS A/C, BM USED: MIAMI-DADE COUNTY MI-15-R EL 5.15 NGVD 1929, HIGHEST CROWN OF ROAD 5.62

Signature PSM# 2852 Date 5-1-09 ☐ Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).

a) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.

b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ ☐ feet ☐ meters ☐ above or ☐ below the LAG.

E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.

E3. Attached garage (top of slab) is _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.

E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? ☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner's or Owner's Authorized Representative's Name _____

Address	City	State	ZIP Code
Signature	Date	Telephone	
Comments			

☐ Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9.

☐ The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

☐ The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. Permit Number 1000000000	G5. Date Permit Issued 5-1-09	G6. Date Certificate Of Compliance/Occupancy Issued 5-1-09
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1. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

2. Elevation of as-built lowest floor (including basement) of the building: _____ ☐ feet ☐ meters (PR) Datum _____

3. BFE or (in Zone AO) depth of flooding at the building site: _____ ☐ feet ☐ meters (PR) Datum _____

4. Community's design flood elevation _____ ☐ feet ☐ meters (PR) Datum _____

Local Official's Name	Title
Community Name	Telephone
Signature	Date
Comments	

☐ Check here if attachments

Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
210 KNOLLWOOD DRIVE

City KEY BISCAIYNE State FL ZIP Code 33033

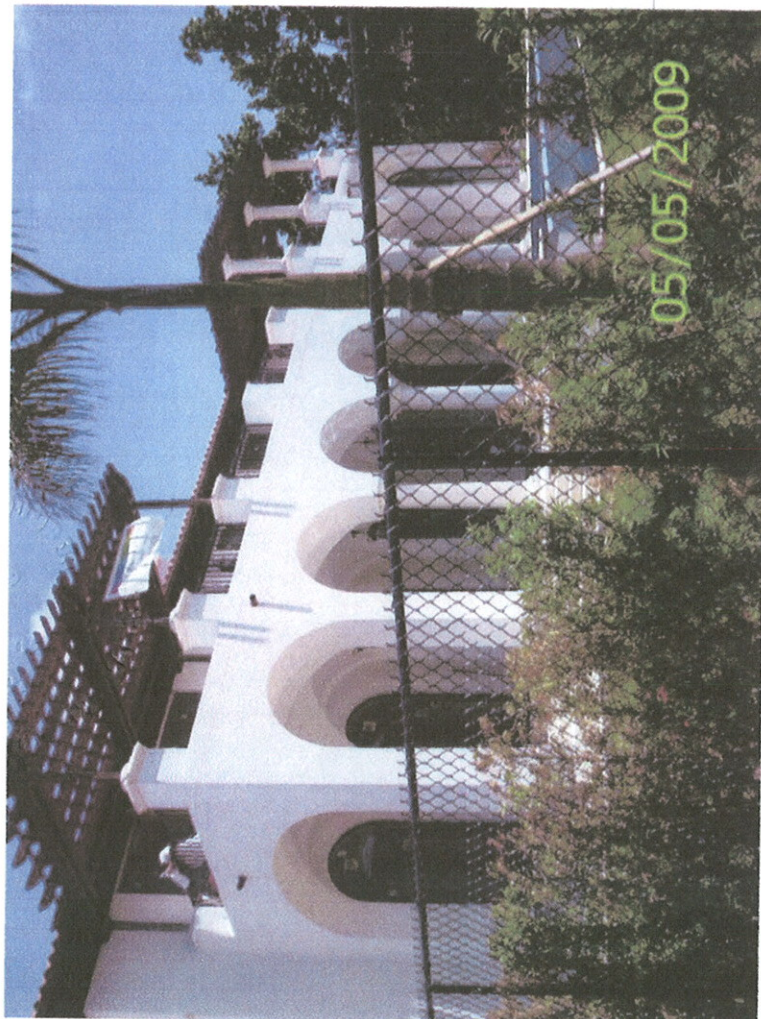
For Insurance Company Use:

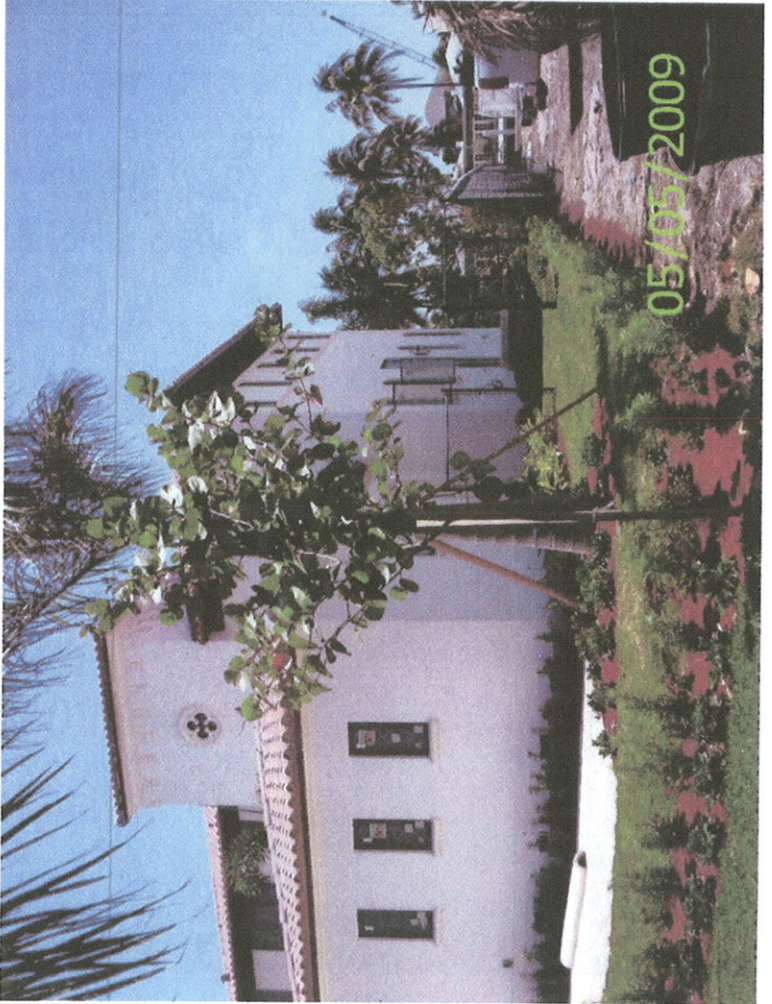
Policy Number

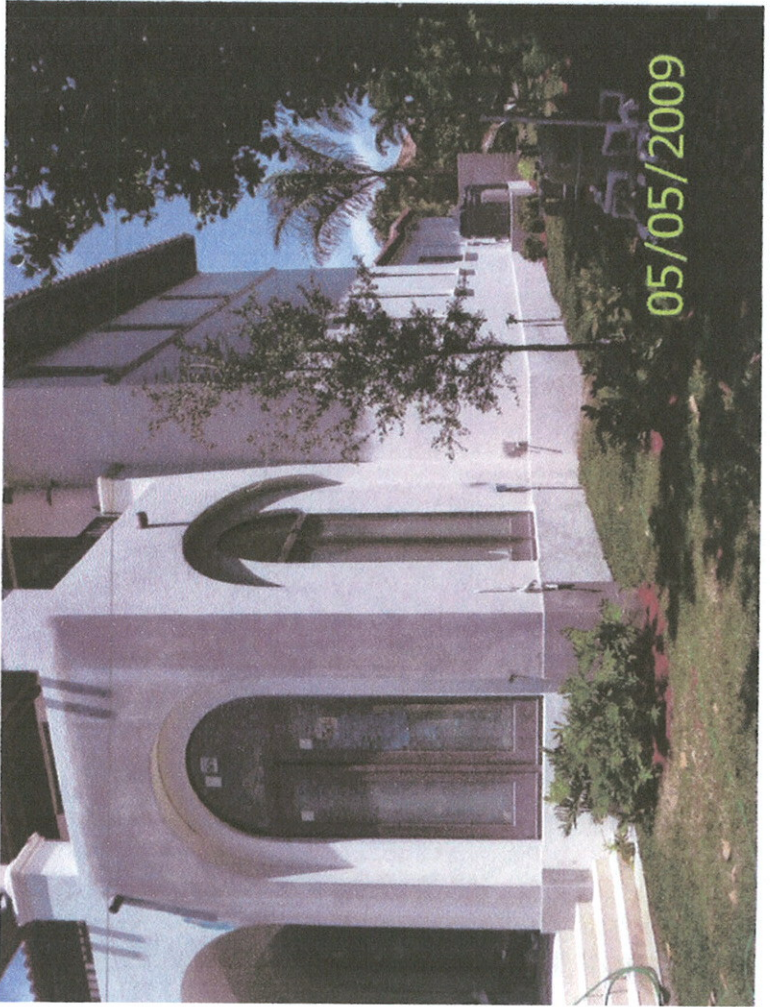
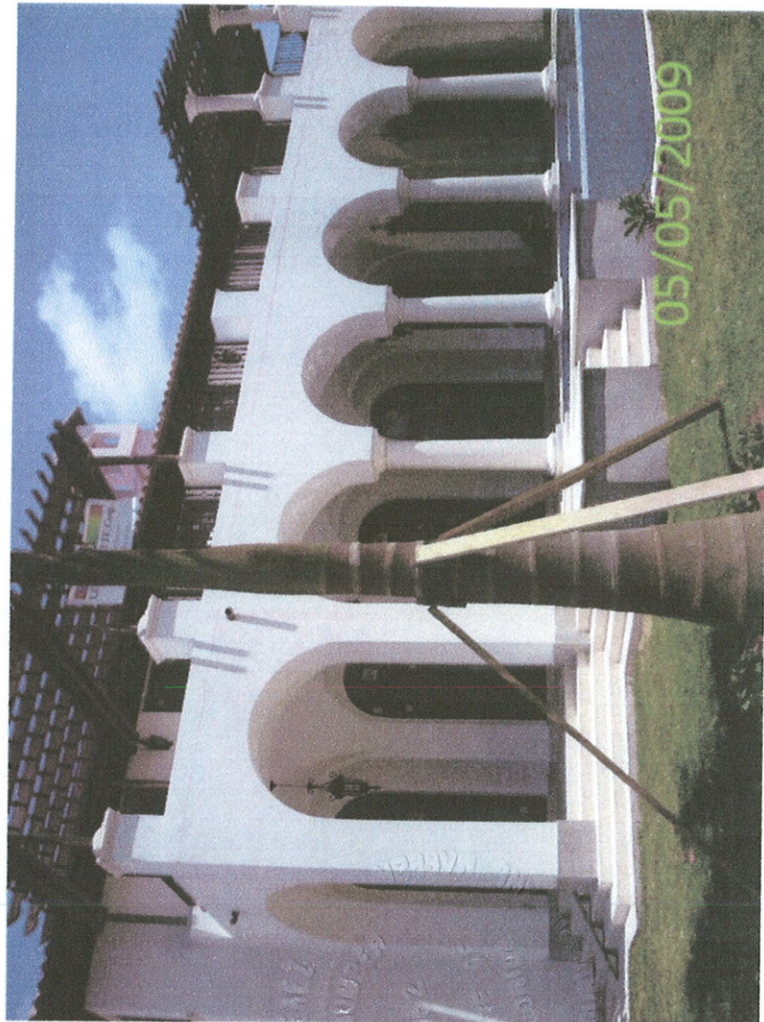
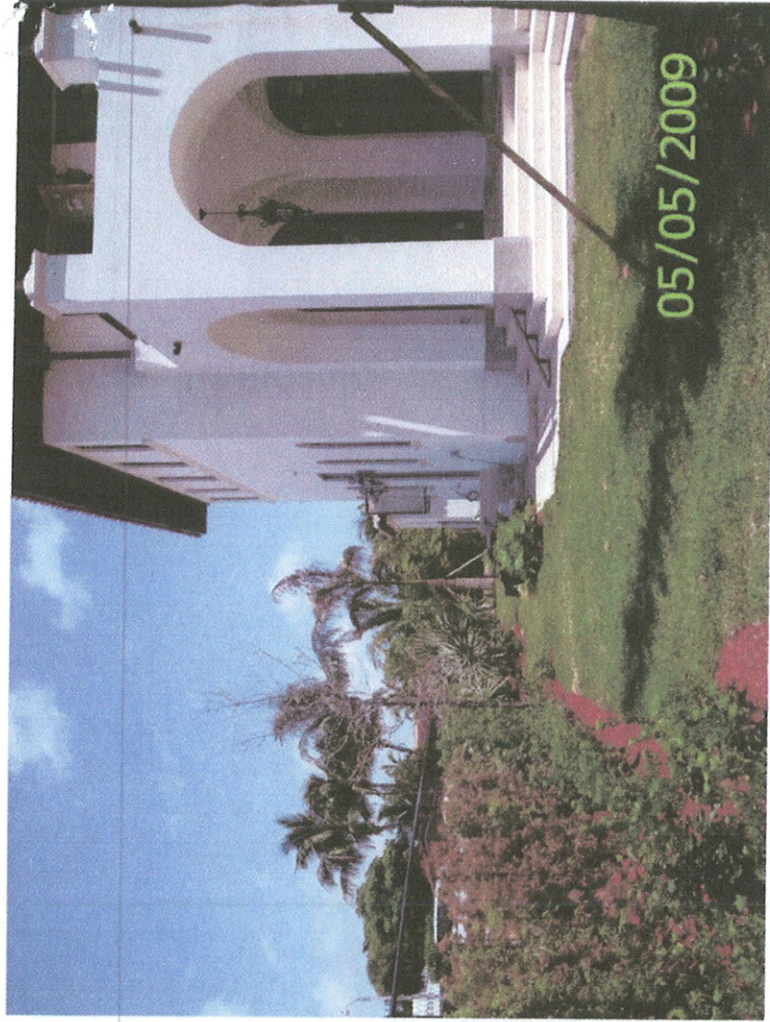
Company NAIC Number

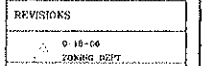
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page on the reverse.

ORDER # 4-09-65





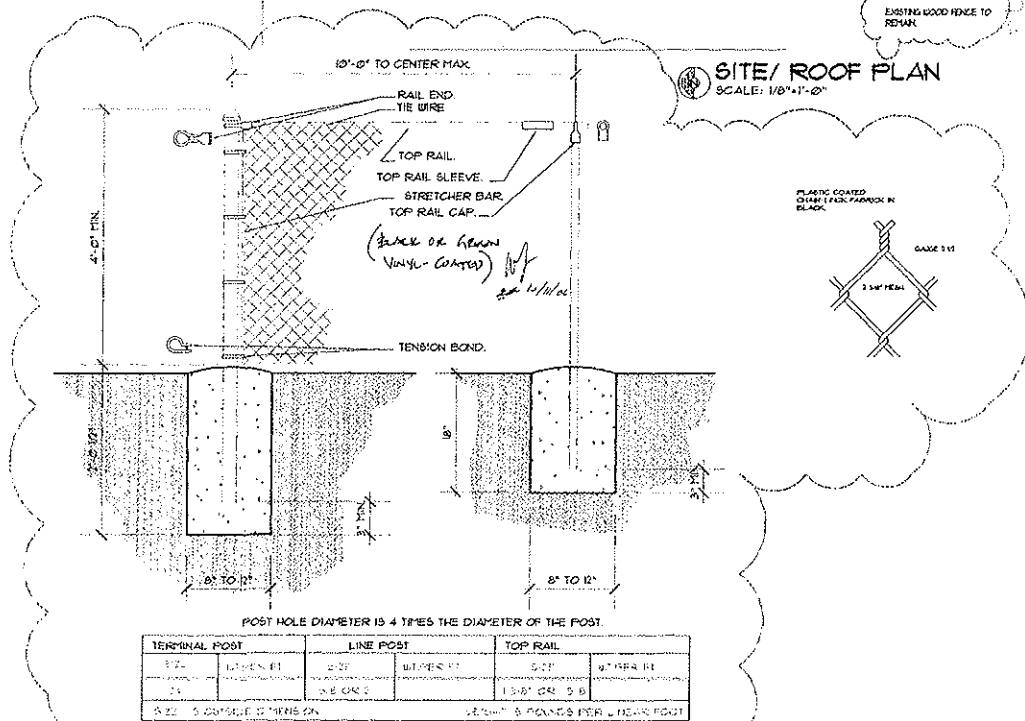
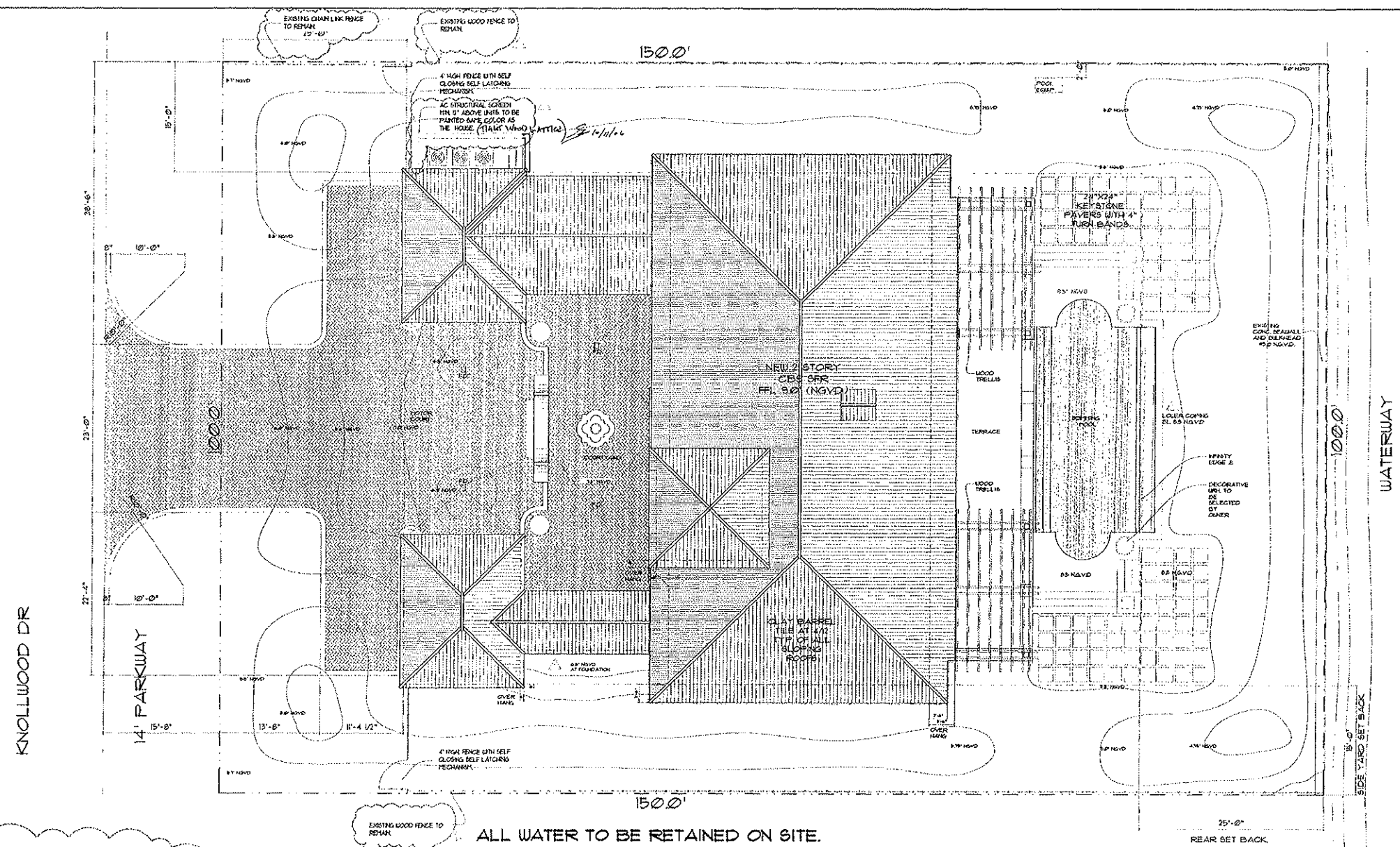




210 KNOLLWOOD LLC
210 Knollwood Dr.
Key Biscayne, Florida

REAL

A1

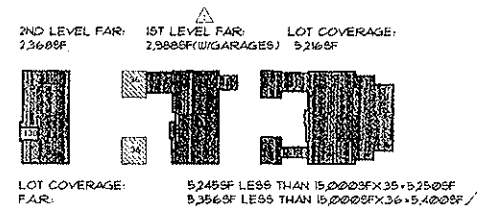


ZONING: VE (WATERFRONT)
SET BACKS:
FRONT 25'-0"
REAR 25'-0"
INTERIOR SIDE 15'-0"

TABLE OF AREAS & PERCENTAGE OF GROUND COVER

GROSS SQ FT OF LOT	15,000 SQ FT
LEVEL 1 A/C SPACE	2,344 SQ FT
LEVEL 2 A/C SPACE	2,368 SQ FT
TOTAL	5,238 SQ FT (34.9%)
NON A/C SPACE	1647 SQ FT
TOTAL SQ FT UNDER ROOF	6,689 SQ FT
GREEN AREA	5,160 SQ FT 41%

LOT COVERAGE AND FAR DIAGRAMS:



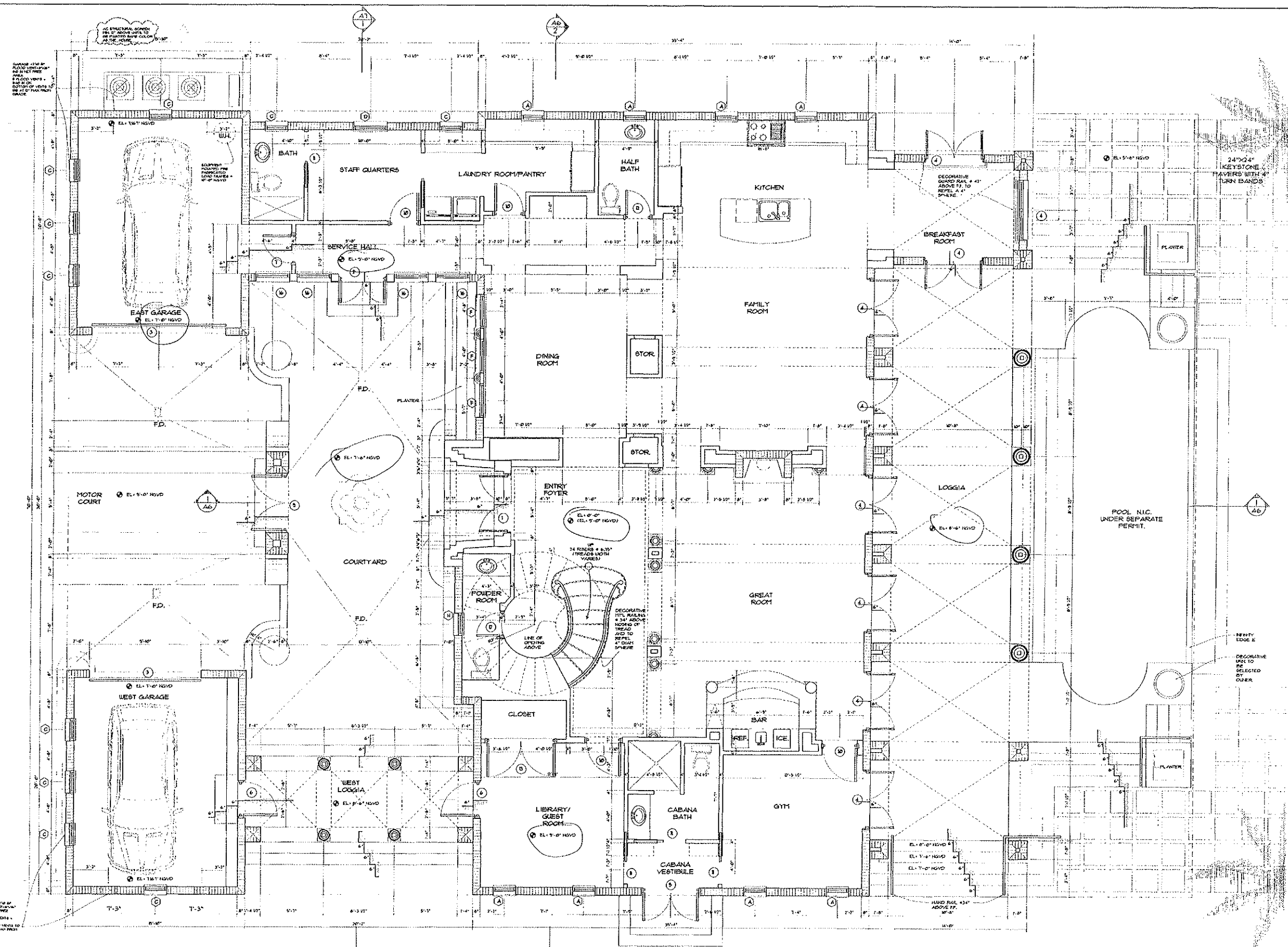
HIGHLAND DR

WHOLE WOOD DR

SAN FLORIDA DR

0 110 ft

LOT 14, BLOCK 7, "CAPE FLORIDA SUBDIVISION
SECTION 2", ACCORDING TO THE PLAT THEREOF,
AS RECORDED IN PLAT BOOK 70, AT PAGE 67 OF
THE PUBLIC RECORDS OF MIAMI-DADE COUNTY,
FLORIDA



FIRST FLOOR PLAN
SCALE: 1/4"=1'-0"



REVISIONS
1. 12-10-00
2. 12-10-00

210 KNOLLWOOD LLC
210 Knollwood Dr.
Key Biscayne, Florida

Signature

A2